Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

Open to Public

A Fo	r the 2	2009 caler	ndar vea	r, or tax year beginr	ning 09-01-2009	and ending 08-31-2	2010				-
			ease	C Name of organization NORTHWEST CHINES	า				D Employer i	dentification number	
┌ Add	dress ch	nange us	se IRS bel or		E SCHOOL				91-16740		
┌ Na	me cha	nge pr	int or	Doing Business As					E Telephone	number	
┌ Init	tıal retu	rn S r	pe. See ecific	Number and street (c	or P.O. box if mail i	s not delivered to street ad	ddress) Ro	om/suite	(206) 349	9-6927	
Г Теі	mınate		struc- ons.	515 116TH AVENUE N ROOM/SUITE 228				,	G Gross receip	ts \$ 694,500	
✓ Am	nended	return		City or town, state or	r country, and ZIP -	+ 4					
Г _{Арі}	plication	n pending		BELLEVUE, WA 9800							
			F Nam	l ne and address of pr	incipal officer		H/:	a) Ic +b	■ ıs a group retı	urn for	
							'''		ites?	TYes ▼No	0
								•	llaffiliates inclu	uded? Yes T st (see instructions)	
I Ta	x-exem	npt status	5 01(c)	(3) 4 (insert no)	4947(a)(1) or	□ 527	н	_	ıp exemption i	•	
	ebsite	e: ► WWW	NWCHIN	NESE ORG			`	•			
<u></u>		aanimatian 🗷	Cornorat	ion Trust Associat	uan Cothar b		<u> </u>	Vons of fo	rm ation	M State of logal dominio	
		Summa		ion i must i Associat	ion j Other F		L	Year of fo	imation	M State of legal domicile	
				e organization's mis	sıon or most sıç	nıfıcant actıvıtıes					
						EDUCATION OPPOR					
9				E UNDERSTANDIN IE COMMUNITY	G OF CHINESE	HERITAGE AND CU	JLIUKE	ANDIO	CONTRIBUT	TO THE CULTURAL	-
Ě											
Ē											
Governance	2	Check this	box ► F	 If the organization	discontinued it	s operations or dispos	sed of mo	ore than	25% of its ne	t assets	
						t VI, line 1a)				3	9
<u>e</u>	4		_	_		ing body (Part VI, line				4	ç
Activities &	5			nployees (Part V , lır			,				129
ষ্	6	Total numb	ber of vo	lunteers (estimate i	fnecessary) .					6	17
	7a	Total gros	s unrelat	ted business revenu	ıe from Part VII	I, column (C), line 12				7a	C
	b	Net unrela	ted busı	ness taxable incom	e from Form 990	D-T, line 34				7b	
								Pric	r Year	Current Year	
a.	8	Contribut	ions and	d grants (Part VIII,	line 1h)		-		36,129	119,1	107
Rayenue	9	_	ogram service revenue (Part VIII, line 2g)						472,963	· · · · · · · · · · · · · · · · · · ·	277 821
	10					1, and 7d)	•		10,092		
	11		•	,		c, 9c, 10c, and 11e)	1		17,880	2	295
	12			ad lines 8 through 1	•	art VIII, column (A),	iine		537,064	694,5	500
	13), lines 1-3)					0
	14	Benefits paid to or for members (Part IX, column (A), line 4)									0
ø,	15		otherco	mpensation, employ	yee benefits (Pa	rt IX, column (A), line	es 5-		246,553	206	100
æ E	16-	10) Professional fundraising fees (Part IX, column (A), line 11e)							240,553	306,1	
Expenses	16a					ne iie)					0
Д	b	Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright^0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)							216 566	210 (
	17 18					1, 11f-24f) X, column (A), line 25			216,566		
	19					2	_		73,945	78,4	
₩ 00		Revenue	1033 CXP	June 19 Subtract IIII	2 10 110111 11110 1			Beainnin	g of Current		
Net Assets or Fund Balances									ear	End of Year	
33.4g 19.3g	20			t X, line 16)					616,601	733,7	781
and A	21								794	39,5	
	22			d balances Subtrac	t line 21 from li	ne 20			615,807	694,2	207
Pai	rt II	Signat									
						eturn, including accompany rer (other than officer) is b					ge
								1			
Sign		******	e of office	ır				2011- Date	-04-15		
Here		Signature of officer						Pale			
				R OF BOARD OF DIRECT e and title	ORS						
		F	·	-		Date	Check	ıf	Dronaror's id-	ntifying pumber	
De: 1		Preparer's s signature		4		2011-06-22	self-		(see instruction	ntıfyıng number ons)	
Paid Pren	arer's	, ·		L IIM MA DUC			empoly	red 🕨 🔽	,		
Use		ıf self-employed),						EIN ▶			
JJ6 (J.11y	address, and ZIP + 4 605 NE 200TH ST						Phone no (206) 218-3689			
				SHORELINE, WA 9						<u> </u>	
May	the IR	S discuss t	hıs retui	rn with the preparer	shown above? (see instructions) .				┌Yes ┌No	

Cat No 11282Y

Part III Statement of Program Service Accomplishments

1	Briefly	describe	the	organization's missio	r

OFFERING CHINESE LANGUAGE AND CULTURAL EDUCATION OPPORTUNITIES TO THE GREATER SEATTLE COMMUNITY TO PROMOTE THE UNDERSTANDING OF CHINESE HERITAGE AND CULTURE AND TO CONTRIBUT TO THE CULTURAL DIVERSITY IN THE COMMUNITY

2	Did the organization undertake a the prior Form 990 or 990-EZ?		rvices during the year w	hich were not listed on	┌ Yes ┌ No
	If "Yes," describe these new ser	vices on Schedule O			
3	Did the organization cease cond services?		nt changes in how it cond	lucts, any program	┌ Yes ┌ No
	If "Yes," describe these changes	on Schedule O			
4	Describe the exempt purpose ac Section 501(c)(3) and 501(c)(4 allocations to others, the total e) organizations and section	on 4947(a)(1) trusts are	required to report the am	
4a	(Code) (Expe	nses \$ 512,701	including grants of \$) (Revenue \$	586,023)
	THE SCHOOL PROVIDED CHINESE LAN AUGUST 31, 2010	GUAGE & CULTURAL CLASSES I	N THE GREATER SEATTLE ARE	EA TO OVER 1000 STUDENTS FO	R THE ACADEMIC YEAR ENDING
4b	(Code) (Expe	nses \$	including grants of \$) (Revenue \$)
) (D	
4c	(Code) (Expe	nses \$	including grants of \$) (Revenue \$)
4d	Other program services (Desc	rıbe ın Schedule O) See a	also Additional Data for	Description	
	(Expenses \$	including grants of	f\$) (Revenue \$	98,361)
4e	Total program service expenses	5 ►\$ 512,70	1		
					Form 990 (2009)

Part TV	Checklist of Required Sched	ules
4 11 7 7 4	Checkinst of Regulied Sched	uics

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νo
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		Νο
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		Νo
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		ĺ	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Part III</i>	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νο
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		N o
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Νο
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		N o
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		N o
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		N o
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		N o
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		N o
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		N o
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		N o
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		N o
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		N o
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		N o
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2009)

Part V	Statements I	Regarding	Other IRS	Filings	and Tax	Compliance
	ota temento i	ixegaraing	Other Tito	95	and lax	Compilation

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νο
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		-110
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νο
Ь	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νο
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νο
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Saction	^	Governing	Body	and	Management
Section	Α.	Governing	Douy	allu	management

Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? Did the organization become aware during the year of a material diversion of the organization's assets? Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Bud the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? Bach committee with authority to act on behalf of the governing body? Step of the person of the governing body? Step of the prior Form 990 was and yes The governing body? Step of the organization of the prior Form 990 was and yes Bach committee with authority to act on behalf of the governing body? Step of the prior Form 990 was and yes The governing body? Step of the prior Form 990 was and yes The governing body? Step of the prior Form 990 was and yes The governing body? Step of the prior Form 990 was and yes The governing body? Step of the prior Form 990 was and yes The governing body? Step of the prior Form 990 was and yes The governing body? Step of the prior Form 990 was and yes The governing body? Step of the prior Form 990 was and yes The governing body? Step of the prior Form 990 was and yes The governing body? Step of the prior Form 990 was and yes The governing body or the prior Form 990 was and yes The governing body or the prior Form 990 was and yes The governing body or the prior Form 990 was and yes The governing body or the prior Form 990 was an expensive to a prior Form 990 was an expensive to a prior Form 990 was				Yes	No
b Enter the number of voting members that are independent .					
Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	1a	Enter the number of voting members of the governing body 1a 9			
other officer, director, trustee, or key employee?	b	Enter the number of voting members that are independent 1b 9			
supervision of officers, directors or trustees, or key employees to a management company or other person?	2		2		Νο
filed? Did the organization become aware during the year of a material diversion of the organization's assets? Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Build the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? The go	3		3	Yes	
Does the organization have members or stockholders?	4		4	Yes	
Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	Yes	
governing body?	6	Does the organization have members or stockholders?	6	Yes	
B Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body?	7a	•	7a	Yes	
year by the following a The governing body?	b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
b Each committee with authority to act on behalf of the governing body? 8b N 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	8				
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	а	The governing body?	8a		Νo
	b	Each committee with authority to act on behalf of the governing body?	8b		Νo
organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 N	9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨

TAO ZHANG 515 116TH AVE NE SUITE 228 BELLEVUE, WA 98004 (206) 349-6927

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- ◆ List all of the organization's current key employees See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(E) Reportable compensation	(F) Estimated
	amount of other
organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
)	0
)	0
) (0
) (0
) (0
) (0
)	0
(0
	(W- 2/1099- MISC)

Forr	m 990 (2009)			Page ₹
1 b	Total			
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No
s	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization			
	(A) (B) Name and business address Description of services		(C Comper	
		\dashv		
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization •			

Form **990** (2009)

Form 9								Page 9
Part \	VIII	Statement of	of Revenue		(4)	(D)	(6)	(D)
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or
60 (8)	1a	Federated cam	paigns 1a					514
Contributions, gifts, grants and other similar amounts	Ь		ies 1b					
₽.E	c		ents 1c					
iits ≅ a	d		zations 1d					
% <u>.</u> <u>2</u> ,0	e	Government grant						
Sir.	l f	All other contribution	ons, gifts, grants, and 1f	34,495				
至		sımılar amounts no	ot included above ibutions included in					
걸	g							
a Q	h		s 1a-1f	▶	119,107			
				Business Code				
anne.	2a	TUITION			587,729			587,729
es Se	Ь	MISC			271			271
е. Н	c	TUITION REFUND	_		-22,723			-22,723
Program Service Revenue	d		_					
	e							
	f	All other progra	am service revenue					
	_	T-4-1 0 dd l.m.s.	- 2- 26		565 277			
	д 3		s 2a-2f		565,277			+
			ar amounts)		9,821			9,821
	4		stment of tax-exempt bond					
	5	Royalties		▶				
			(ı) Real	(II) Personal				
	6a	Gross Rents						
	Ь	Less rental expenses						
	c	Rental income						
	d	or (loss) Net rental inco	me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of						
		assets other than inventory						
	ь	Less cost or						
		other basis and sales expenses						
	c	Gain or (loss)						
	d		ss)					
	8a	Gross income f events (not inc	from fundraising Tudina					
Other Revenue		\$						
₹ .			s reported on line 1c) ne 18					
æ		See Fare IV, III	a a					
<u>a</u>	ь	Less direct ex	penses b					
₹	С	Net income or ((loss) from fundraising	events 🕨				
	9a		from gaming activities					
		see Part IV, III	ne 19 a					
	ь	Less direct ex	penses b					
	С		(loss) from gaming acti	vities				
	10a	Gross sales of						
		returns and allo	owances . a					
	Ь	less costofa	oods sold b					
	c		(loss) from sales of inv	entory 📂				
		Miscellaneous		Business Code				†
	11a	SALES OF			295			295
		TEXTBOOKS/D	DICTIONARI					_
	Ь							
	c .	A.II						
	d	All other reven						
	e	iotal. Add lines	s 11a-11d	· · · · •	295			
	12	Total revenue.	See Instructions .	▶				
					694,500			575,393

Part IX Statement of Functional Expenses

Do no	ll other organizations must complete column (A) but are not required to co ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		скрепаса	general expenses	СХРСПЭСЭ
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	279,201	211,131	68,070	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
.0	Payroll taxes	26,899	20,444	6,455	
1	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
2	Advertising and promotion				
3	Office expenses				
Ļ	Information technology				
5	Royalties				
5	Occupancy	58,561	53,291	5,270	
7	Travel				
8	Payments of travel or entertainment expenses for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
)	Interest				
L	Payments to affiliates				
2	Depreciation, depletion, and amortization				
3	Insurance	3,651		3,651	
4	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	STUDENT CLASSES & ACTIVIT	123,829	123,829		
b	STUDENT AWARDS PRIZES	36,009	36,009		
c	TEXTBOOKS & TEACHING MATE	31,104	31,104		
d	STUDENT CLASESS PREVI	20,735	20,735		
е	ADVERTISING	8,278	8,278		
f	All other expenses	27,833	7,880	19,953	
5	Total functional expenses. Add lines 1 through 24f	616,100	512,701	103,399	
6	Joint costs. Check here ▶ ☐ If following SOP 98-2				
	Complete this line only if the organization reported in column (B) joint costs from a combined educational				

Fa	ITLX	balance Sheet				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				118,076	1	224,970
	2	Savings and temporary cash investments				484,679	2	494,476
	3	Pledges and grants receivable, net					3	_
	4	Accounts receivable, net					4	
	5	Receivables from current and former officers, directors, trustees, highest compensated employees Complete Part II of	key en	nployees, a	nd			
		Schedule L					5	
	6	Receivables from other disqualified persons (as defined under see persons described in section 4958(c)(3)(B) Complete Part II of	tion 4	958(f)(1)) a	and			
		Schedule L					6	
ä	7	Notes and loans receivable, net					7	
Assets	8	Inventories for sale or use					8	
⋖	9	Prepaid expenses and deferred charges				12,004	9	9,916
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part</i> VI of Schedule D	10a	1	5,951			
	ь	Less accumulated depreciation	10b	1	1,532	1,842	10c	4,419
	11	Investments—publicly traded securities					11	
	12	Investments—other securities See Part IV, line 11		•			12	
	13	Investments—program-related See Part IV, line 11					13	
	14	Intangible assets					14	
	15	Other assets See Part IV, line 11					15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)				616,601	16	733,781
	17	Accounts payable and accrued expenses .					17	1,401
	18	Grants payable					18	
	19	Deferred revenue					19	
10	20	Tax-exempt bond liabilities			20			
ğ	21	Escrow or custodial account liability Complete Part IV of Schedule	D.	•			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
Ĭ		persons Complete Part II of Schedule L		•			22	
	23	Secured mortgages and notes payable to unrelated third parties					23	
	24	Unsecured notes and loans payable to unrelated third parties .		•			24	
	25	Other liabilities Complete Part X of Schedule D				794	25	38,173
	26	Total liabilities. Add lines 17 through 25				794	26	39,574
ces		Organizations that follow SFAS 117, check here ▶ 🔽 and complet through 29, and lines 33 and 34.	te line	es 27				
Balance	27	Unrestricted net assets				615,807	27	694,207
8	28	Temporarily restricted net assets					28	
Ξ	29	Permanently restricted net assets					29	
or Fund		Organizations that do not follow SFAS 117, check here ► ☐ and lines 30 through 34.	comple	ete				
	30	Capital stock or trust principal, or current funds					30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .					31	
	32	Retained earnings, endowment, accumulated income, or other fun	ds				32	
ž	33	Total net assets or fund balances				615,807	33	694,207
_	34	Total liabilities and net assets/fund balances				616,601	34	733,781

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Yes	
b	Were the organization's financial statements audited by an independent accountant?	2b		Νo
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	3b		

Form **990** (2009)

DLN: 93493173009141

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

Attach to Form 990 or Form 990-EZ. See separate instructions.

Inspection **Employer identification number**

ORTHWEST	CHINESE SO	CHOOL							
Dowl T		f Db	li - Charita Chat			91-1674030			
Part I					must complete this pa		tions		_
_					h 11, check only one box	()			
1		•	· ·	sociation of churches se					
2 🔽				(A)(ii). (Attach Schedul		- > / !!!			
3	•		·	-	ed in section 170(b)(1)(
4			organization operate y, and state	d in conjunction with a h	ospital described in sect	ion 170(b)(1)(A)(iii). Ente	r the	
5	An orgai	nization ope	rated for the benefit	of a college or university	owned or operated by a	governmental unit	describe	d ın	
	section :	170(b)(1)(A	(iv). (Complete Pa	rt II)					
6	A federa	l, state, or l	ocal government or o	jovernmental unit descri	bed in section 170(b)(1)	(A)(v).			
7	describe	d in	normally receives a (vi) (Complete Pa	·	upport from a governmen	tal unit or from the	e general	public	
8	A comm	unity trust o	lescribed in section :	170(b)(1)(A)(vi) (Comp	olete Part II)				
9	An orgai	nization that	normally receives	(1) more than 331/3% of	ts support from contrib	utions, membersh	p fees, ar	nd gros	SS
	receipts	from activit	ies related to its exe	empt functions—subject	to certain exceptions, an	d (2) no more tha	n 331/3%	of	
	ıts supp	ort from gro	ss investment incom	e and unrelated busines	s taxable ıncome (less s	ection 511 tax) fr	om busine	esses	
	acquired	by the orga	nızatıon after June 3	0, 1975 See section 5 0	9(a)(2). (Complete Part	III)			
LO $ extstyle e$	Anorgai	nization orga	anized and operated	exclusively to test for pu	ıblıc safety See section 5	509(a)(4).			
ıı [one or m	ore publicly	supported organizat	tions described in section rting organization and co	it of, to perform the funct n 509(a)(1) or section 5 implete lines 11e throug Functionally integrated	09(a)(2) See sec h 11h		a)(3).	Check
е Г	other the	an foundatio 509(a)(2)	n managers and othe	er than one or more publi	lled directly or indirectly cly supported organization	ons described in s	ection 50	9 (a)(1	.) or
f		-	eceived a written det	ermination from the IRS	that it is a Type I, Type	II or Type III sup	porting o	rganız	ation,
g	check th		006 has the organiz	ation accepted any diftic	r contribution from any o	fthe			'
9		persons?							
	(i) a per	son who dire	ectly or indirectly co	ntrols, either alone or to	gether with persons desc	rıbed ın (ıı)		Yes	No
	and (III)	below, the g	overning body of the	the supported organizat	ion?		11g(i)		
	(ii) a far	nıly membei	of a person describe	ed ın (ı) above?			11g(ii)		
	(iii) a 35	5% controlle	ed entity of a person	described in (i) or (ii) ab	ove?		11g(iii)		
h	Provide	the following	g information about t	he supported organizatio	n(s)				
(i) Name suppo organiz	e of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section	(iv) Is the organization in col (i) listed in your governing document?	(v) Did you notify the organization in col (i) of your support?	(vi) Is the organization i col (i) organization in the US?		A mo	vii) ount of port?

Yes

instructions))

No

Total

Yes

No

Yes

	Support Schedule (Complete only if yo	for Organiza	tions Describe box on line 5, 7	ed in IRC 170 7, or 8 of Part I	(b)(1)(A)(iv)	and 170(b	o)(1)(A)(vi)
S	ection A. Public Support		•		•		
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by	,					
	each person (other than a						
	governmental unit or publicly						
	supported organization) included or						
	line 1 that exceeds 2% of the						
_	amount shown on line 11, column (f) Public Support. Subtract line 5 from						
6	line 4						
S	ection B. Total Support						
	endar year (or fiscal year beginning	() 2 2 2 5	(1) 2006	() 2007	(D 0 0 0 0	() 2 2 2 2	(6) =
	in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or						
	not the business is regularly carried on						
10	Other income (Explain in Part						
10	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
	through 10)						
12	Gross receipts from related activiti	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is check this box and stop here	for the organizati	on's first, second	. thırd, fourth, or f	ifth tax year as a	501(c)(3) or	ganization,
S	ection C. Computation of Pul	olic Support P	ercentage				
14	Public Support Percentage for 200			11 column (f))		14	
15	Public Support Percentage for 200	8 Schedule A , Pa	rt II, lıne 14			15	
16a	33 1/3% support test-2009. If the	organization did	not check the box	on line 13, and	line 14 is 33 1/3%	or more, ch	eck this box
b	and stop here. The organization qua 33 1/3% support test—2008. If the	organization did	not check the box	on line 13 or 16	ia, and line 15 is 3	3 3 1/3% or m	
17-	box and stop here. The organization				. 12 16 16'		►
т/а	10%-facts-and-circumstances test						lain
	is 10% or more, and if the organiza in Part IV how the organization mee						
	organization	sis the lacts allu	Circumstalices	test The Organiz	acion quannes as	a publicly SU	pported F
b	10%-facts-and-circumstances test	-2008. If the ora:	anization did not d	heck a box on lir	ne 13.16a 16b d	r 17a and lin	•
	15 is 10% or more, and if the organ						· -
	Explain in Part IV how the organiza						olicly
	supported organization				J .=	F	▶ □
18	Private Foundation If the organizat	ion did not check	a box on line 13,	16a, 16b, 17a o	r 17b, check this	box and see	
	instructions						▶ ┌

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you	checked the	box on line 9 of	f Part I.)			
	ction A. Public Support	Т	_	T		T	Г
Cale	ndar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	ın) Gıfts, grants, contributions, and						
-	membership fees received (Do not						
	ınclude any "unusual grants`")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the			-			
4	organization's benefit and either						
	paid to or expended on its						
	behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
6	the organization without charge Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
, u	and 3 received from disqualified						
	persons						
b	A mounts included on lines 2 and 3						
	received from other than disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning		1				
Cale	in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
C	Add lines 10a and 10b Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c,						
	11 and 12)				6.61	===:	
14	First Five Years If the Form 990 is for	r the organizat	ion's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orgar	iization, ► □
	check this box and stop here						-1
Se	ction C. Computation of Publi	c Support P	ercentage				
15	Public Support Percentage for 2009			13 column (f))		15	
16	Public support percentage from 2008	3 Schedule A . F	Part III. line 15			16	
	Tappant portainings from 2000		,			10	
Se	ction D. Computation of Inve	stment Inco	nme Percents	ne			
17	Investment income percentage for 2				n (f))	17	
	Investment income percentage from				· X-77		
18	·		,		1 to	18	
19a	33 1/3% support tests—2009. If the more than 33 1/3%, check this box a					man 33 1/3% and	i iine 1/ is not
	organization	ing stop liele. I	ne organization qu	uannes as a publ	iciy supported		
b	33 1/3% support tests—2008. If the	organızatıon dı	d not check a box	on line 14 or line	e 19a, and line 16	is more than 33	1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

Additional Data

Software ID: Software Version:

EIN: 91-1674030

Name: NORTHWEST CHINESE SCHOOL

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other progran	n services			
(Code) (Expenses \$	including grants of \$) (Revenue \$	98,361)
PROGRAM RELAT	ED ACTIVITIES			

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
STUDENT CLASSES & ACTIVIT	123,829	123,829		
STUDENT AWARDS PRIZES	36,009	36,009		
TEXTBOOKS & TEACHING MATE	31,104	31,104		
STUDENT CLASESS PREVI	20,735	20,735		
ADVERTISING	8,278	8,278		

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493173009141

OMB No 1545-0047

Inspection

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Employer identification number NORTHWEST CHINESE SCHOOL 91-1674030 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ☐ Yes V No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year 🕨 Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$_ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

following amounts required to be reported under SFAS 116 relating to these items

provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1

Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Cat No 52283D Schedule D (Form 990) 2009

Part	Organizations Maintaining Co	llections of Ar	t, His	tori	cal T	reasur	es, or O	ther	Similar	Asse	ts (cc	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	_		_		e of its co	llection		
а	Public exhibition		d	Г	Loan	orexcha	ange progr	ams				
b	Scholarly research		e	Γ	O the	r						
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	aın hov	w the	y furth	er the or	ganızatıon	's ex	empt purpo	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								llar	Γ.	Yes	✓ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	d "Y€	es" to For	m 990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	ediary	for c	ontribi	utions or	other ass	ets n	ot	Γ,	Yes	√ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ing t	able		Γ			A mou	nt	
c	Beginning balance							1c				
d	Additions during the year						r	1d				
e	Distributions during the year						r	1e				
f	Ending balance						F	1f				
2a	Did the organization include an amount on Fo	orm 990 Part X lun	217 م				L				Yes	✓ No
	If "Yes," explain the arrangement in Part XIV		~ Z I '							,		j: 140
	t V Endowment Funds. Complete		n ans	wer	ed "Ye	s" to Fo	orm 990	Part	- IV line	10		
٠	Endownient i unus. compiete i	(a)Current Year		Prior `			Years Back		hree Years B		Four Y	ears Back
la.	Beginning of year balance											
b	Contributions											
С	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities											
	and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as									
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment											
С	Term endowment ▶											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	that a	are hel	d and ad	mınıstere	d for t	:he			
	organization by										Yes	No
	(i) unrelated organizations			•				•		3a(i)		Νο
_	(ii) related organizations			•						3a(ii)		No
	If "Yes" to 3a(II), are the related organizatio	·						•		3b		No
1	Describe in Part XIV the intended uses of the Investments—Land, Buildings					100 Dar	t V line	1.0				
ZGII	VI Investments—Land, Buildings	s, and Equipme	:III. 3								Т	
	Description of investment					or other estment)	(b)Cost or basis (otl		(c) Accum deprecia		(d) B	ook value
la	and		•								↓	
b	Buildings		•								↓	
				- 1			1		1		1	
c	easehold improvements		•								<u> </u>	
	easehold improvements	 					1	5,951		11,532		4,419
d	Equipment						1	5,951		11,532		4,419

Part VII Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation	
		Cost or end-of-year market value	
Financial derivatives			
Closely-held equity interests			
Other			
	+		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See		12	
Part VIII Investments—Program Related. See	Form 990, Part X, line		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
		Social on your marker value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(h) Rook value	
	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	(b) Book value	
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	ne 15. tion		
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	ne 15. tion 5.)	(b) Book value	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	ne 15. tion 5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes WA GES PAYABLE	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes WAGES PAYABLE PREPAID TUITION	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes WA GES PAYABLE	5.) , line 25. (b) A mount		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes WAGES PAYABLE PREPAID TUITION	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes WAGES PAYABLE PREPAID TUITION	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes WAGES PAYABLE PREPAID TUITION	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes WAGES PAYABLE PREPAID TUITION	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes WAGES PAYABLE PREPAID TUITION	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes WAGES PAYABLE PREPAID TUITION	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes WAGES PAYABLE PREPAID TUITION	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes WAGES PAYABLE PREPAID TUITION	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes WAGES PAYABLE PREPAID TUITION	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes WAGES PAYABLE PREPAID TUITION	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes WAGES PAYABLE PREPAID TUITION	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes WAGES PAYABLE PREPAID TUITION	5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes WAGES PAYABLE PREPAID TUITION	5.)		

additional information

Return Reference | Explanation

Ident if ier

a r	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	its
	Total revenue (Form 990, Part VIII, column (A), line 12)	2
	Total expenses (Form 990, Part IX, column (A), line 25)	2
	Excess or (deficit) for the year Subtract line 2 from line 1	2
	Net unrealized gains (losses) on investments	4
	Donated services and use of facilities	5
	Investment expenses	6
	Prior period adjustments	7
		8
	Other (Describe in Part XIV)	9
	Total adjustments (net) Add lines 4 - 8	-
	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10
Ė	Reconciliation of Revenue per Audited Financial Statements With Revenue	
	Total revenue, gains, and other support per audited financial statements	1
	A mounts included on line 1 but not on Form 990, Part VIII, line 12	
	Net unrealized gains on investments	
	Donated services and use of facilities	
	Recoveries of prior year grants	
	Other (Describe in Part XIV)	
	Add lines 2a through 2d	2e
	Subtract line 2e from line 1	3
	A mounts included on Form 990, Part VIII, line 12, but not on line 1	
	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
	Other (Describe in Part XIV)	
	Add lines 4a and 4b	4c
	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5
į	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Ret
	Total expenses and losses per audited financial statements	1 1
	Amounts included on line 1 but not on Form 990, Part IX, line 25	
	Donated services and use of facilities	
	Prior year adjustments	1
	Other losses	1
	Other (Describe in Part XIV)	1
	Add lines 2a through 2d	- 2e
	Subtract line 2e from line 1	3
	A mounts included on Form 990, Part IX, line 25, but not on line 1:	
	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
	Other (Describe in Part XIV)	
	Other (Describe in Part XIV)	4.
	Other (Describe in Part XIV)	4c 5

Schedule D (Form 990) 2009

Employer identification number

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

NORTHWEST CHINESE SCHOOL

Schools

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2009

Open to Public Inspection

91-1674030 YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain Yes 3 ADMISSION SHALL NOT BE RESTRICTED BY RACE, COLOR, CREED, RELIGION, NATIONAL ORIGIN, GENDER, AGE, SEXUAL ORIENTATION, MARITAL STATUS, OR DISABILITY 4 Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff? Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990) Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990) 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Νo **b** Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form Yes 990)

DLN: 93493173009141

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

licensing

SCHEDULE G

Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. 🏲 Attach to Form 990 or Form 990-EZ. 🏲 See separate instructions.

Supplemental Information Regarding

	ne of the organization RTHWEST CHINESE SCHO	0 L					Employer iden	tification number
							91-1674030	
Pa		tivities. Completers are not required			tion answered "Yes" s part.	to Form	990, Part IV	, line 17.
a b c d 2a	Indicate whether the organ Mail solicitations Internet and e-mail so Phone solicitations In-person solicitations Did the organization have or key employees listed in If "Yes," list the ten highes to be compensated at leas	licitations s a written or oral agre Form 990, Part VII st paid individuals or	ement wi) or entity entities	e f g th any ind / in conne (fundraise	Solicitation of noi Solicitation of gov Special fundraisin dividual (including office action with professional agreem	n-governm vernment ong events ers, directo fundraisin ents unde	nent grants grants ors, trustees g activities? r which the fur	
	(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundrais custo contri contribu	er have dy or rol of	(iv) Gross receipts from activity	(or ref	ount paid to tained by) ser listed in ol (i)	(vi) A mount paid to (or retained by) organization
Tota	al			•				

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or

		more than \$15,000 on Form	(a) Event #1	(b) Event #2	T	1	
				(D) EVENT #2	(c) O ther Events	(d) Total Events (Add col (a) through	
			990PTVIII1C (event type)	(event type)	(total number)	col (c))	
Revenue	1	Gross receipts	84,612	2		84,612	
	2	Less Charitable contributions	84,612	2		84,612	
	3	Gross income (line 1 minus line 2)					
	4	Cash prizes					
မှာ	5	Non-cash prizes					
Expenses	6	Rent/facility costs					
ă	7	Food and beverages					
Direct	8	Entertainment					
Δ	9	Other direct expenses .					
	10	Direct expense summary Add lin	es 4 through 9 ın columr	ı(d)	🛌		
	11	Net income summary Combine li				·	
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than	
<u></u>			(a) Bingo	(b) Pull tabs/Instant	(c) O ther gaming	(d) Total gaming	
Revenue				bingo/progressive bingo		(Add col (a) through	
Re	١,	Gross revenue					
		Cash prizes					
Expenses							
<u>8</u>	3	Non-cash prizes					
	4	Rent/facility costs					
Drea	5	Other direct expenses					
	6	Volunteer labor	┌ Yes%	┌ Yes%	∀es		
	7	Direct expense summary Add line	s 2 through 5 in column ((d)			
	8	Net gaming income summary Com	ibine lines 1. column d. a	nd line 7			
		,				Yes No	
9 a		ter the state(s) in which the organiza the organization licensed to operate					
b		No," Explain	gag a			· 9a	
	_					_	
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?						
b	If"	Yes," Explain					
11		es the organization operate gaming				11	
12		the organization a grantor, beneficia med to administer charitable gaming	·	•			

			Yes	No
L3	Indicate the percentage of gaming activity operated in			
а	The organization's facility			
b	An outside facility			
4	Enter the name and address of the person who prepares the organization's gaming/special events books and records			
	Name 🕨			
	Address ▶			
	Address ►			
_				
5a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	45-		
ь	If "Yes," enter the amount of gaming revenue received by the organization 🟲 \$ and the	15a		
	amount of gaming revenue retained by the third party 🟲 \$			
c	If "Yes," enter name and address			
	Name 🕨			
	Address 🟲			
6	Gaming manager information			
	Name 🕨			
	Gaming manager compensation 🕨 \$			
	Description of services provided 🕨			
	Director/officer Employee Independent contractor			
7	Mandatory distributions			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	17a		
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent			

Software ID: Software Version:

EIN: 91-1674030

Name: NORTHWEST CHINESE SCHOOL

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service **Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No 1545-0047

2009

Inspection

Name of the organization NORTHWEST CHINESE SCHOOL Employer identification number

91-1674030

ldentifier	Return Reference	Explanation
AMENDED RETURN EXPLANATION	·	TO UPDATE SECTION A PART VII OF FORM 990, LIST OF "OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES, AND HIGHTEST COMPENSATED EMPLOYEES"

ldentifier	Return Reference	Explanation
ALL OTHER ACHIEVEMENTS DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4D	PROGRAM RELATED ACTIVITIES

ldentifier	Return Reference	Explanation
EXPLANATION FOR WHY FORM 990-T NOT FILED	FORM 990, PAGE 5, PART V, LINE 3B	NO UNRELATED BUSINESS INCOME

ldentifier	Return Reference	Explanation
MANAGEMENT DELEGATED	FORM 990, PAGE 6, PART VI, LINE 3	NO

ldentifier	Return Reference	Explanation
SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS	FORM 990, PAGE 6, PART VI, LINE 4	NA

ldentifier	Return Reference	Explanation
MATERIAL DIVERSION OF ASSETS	FORM 990, PAGE 6, PART VI, LINE 5	NA

ldentifier	Return Reference	Explanation
CLASSES OF MEMBERS OR	FORM 990, PAGE 6,	THE ORGANIZATION HAS GENERAL MEMBERS WHICH CONSIST OF
STOCKHOLDERS	PART VI, LINE 6	HOUSEHOLDS THAT HAVE STUDENT(S) CURRENTLY ENROLLED

ldentifier	Return Reference	Explanation
ELECTION OF MEMBERS AND	FORM 990, PAGE 6, PART VI,	AT ITS ANNUAL YEAR MEETINGS, GENERAL MEMBERS ELECT MEMBERS
THEIR RIGHTS	LINE 7A	OF THE BOARD OF DIRECTORS

ldentifier	Return Reference	Explanation
DECISIONS SUBJECT TO	FORM 990, PAGE 6,	DECISIONS BY THE BOARD OF DIRECTORS MAY BE OVERTURNED BY THE
APPROVAL OF MEMBERS	PART VI, LINE 7B	VOTES OF A TWO THIRDS (2/3) MAJORITY OF PARTICIPATING MEMBERS

ldentifier	Return Reference	Explanation
DOCUMENTATION BY GOVERNING BODY	FORM 990, PAGE 6, PART VI, LINE 8A	NA

	ldentifier	Return Reference	Explanation
DOCUMENTATION BY COMMITTEE		FORM 990, PAGE 6, PART VI, LINE 8B	NA

ldentifier	Return Reference	Explanation
ORGANIZATION'S PROCESS USED TO REVIEW	FORM 990, PAGE 6, PART VI,	REVIEW PROCESS CAN BE MEETING IN PERSON OR PHONE
FORM 990	LINE 11	CONFERENCE

ldentifier	Return Reference	Explanation
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	THE ORGANIZATION MONITORS AN DENFORCES THE POLICY THROUGH ITS MONTHLY BOARD MEETINGS AND ANNUAL GENERAL MEMBER MEETINGS

ldentifier	Return Reference	Explanation
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	ALL MEMBERS ON THE BOARD OF DIRECTORS ARE VOLUNTEERS WITHOUT COMPENSATION

ldentifier	Return Reference	Explanation
COMPENSATION PROCESS FOR OFFICERS	FORM 990, PAGE 6, PART VI, LINE 15B	SCHOOL PRINCIPAL'S COMPENSATION IS DETERMINED BY BOARD OF DIRECTORS THROUGH DUE PROCESSES OF THE ORGANIZATION

ldentifier	Return Reference	Explanation
NO PUBLIC DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 18	NA

ldentifier	Return Reference	Explanation
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	BY LAWS AND SOME OTHER GOVERNING DOCUMENTS ARE AVAILABLE ON SCHOOL'S WEBSITE